PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

155-6100

CLAIMS AS FILED - PART I (Column 1) (Co						olumn 2) SMAL			LENTITY OR		OTHER THAN SMALL ENTITY	
TOTAL CLAIMS			20				ſ	RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	370.00	OR	BASIC FEE	740.00
TOTAL CHARGEABLE CLAIMS			26 minus 20=		*			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			√ minus 3 =		*		Ī	X42=		OR	X84=	84
ML	ILTIPLE DEPEN	IDENT CLAIM P	RESENT	ESENT			ľ	+140=		OR	+280=	
* If	the difference	in column 1 is	less than ze	ro, ente	r "0" in c	"0" in column 2		TOTAL		OR	TOTAL	
CLAIMS AS AMENDED - PART II											OTHER	
		(Column 1)	(Colun			(Column 3)	olumn 3) SMAL		ENTITY OR		SMALL ENTITY	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIĞI NUM PREVI PAID	IBER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NOM	Total	*	Minus	**				X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***	- OL AMA	= _		X42=		OR	X84=	
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT							+140=		OR	+280=	,
4					7		TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE		
		(Column 1) (Column 2) (Column 3)									· · ·	:
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME!	Independent	*	Minus	***		=		X42= `	=	OR	. X84=	
	FIRST PRESE	NTATION OF M	ULTIPLE DEP	ENDEN	T CLAIM			+140=		OR	+280=	
								TOTAL		OB.	TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)												
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	* Out Down	Minus	** **	ÿ.	= - : ::::::::::::::::::::::::::::::::::		∢X\$ 9= ₃	-	OR	-X\$18=.	graen.
	Independent	* THE THE YEAR	Minus	***	A 1		7	- X42=	110000	OR	aX84≡∡	
de	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						l ·	+140=	. જેન્દ્રેન્ટ્રી	OR	+280=	Miles of J.
											TOTAL	The reserve of the second
317	#If th "High st No The "Highest Nu	umber Previously F mber Previously Pa	Paid For" IN THI aid For" (Total o	S SPACE r Indepen	is less that dent) is the	an 3, enter "3." e high st numbe	er fou	ind in the ap			lumn 1.	

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